

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

Fee Code	Total # Claims	Number Extra X	Fee	Fee	=	Total
					Sm./Lg.	
Basic Filing Fee	<u>201/101</u>					<u>760</u>
Total Claims >20	<u>203/103</u>	<u>23</u> <u>4</u>	<u>-20 = 3</u> <u>-3 = 1</u>	X	<u>18</u> <u>78</u>	<u>54</u> <u>78</u>
Independent Claims >3	<u>202/102</u>					
Mult. Dep Claim Present	<u>204/104</u>					
Surcharge	<u>205/105</u>					
English Translation	<u>139</u>					

TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 1022

Less Filing Fees Submitted - \$

BALANCE DUE = \$

Marcia Gordon
Office of Initial Patent Examination